* **Red Flag:** A patient who recently had a stroke had missed a third of of his scheduled appointments over the last four months.
* **Probe:** The provider asked the patient how he was dealing with keeping track of appointments since his stroke and if his current work schedule was impacting his ability to get to the clinic.
* **Contextual Factor:** The patient replied that he was having trouble remembering when he had appointments, and that it was harder to get to them because he had been put on a different work shift. (Domains: Social Support/Skills, Abilities and Knowledge/Access)
* **Contextual Plan of Care Made:** The provider and patient discussed involving his girlfriend to help manage his schedule by putting reminders in his phone, which the provider showed him how to do. The provider also went over the patient’s work schedule to figure out what would be good times to schedule appointments.
* **Red Flag:** During a visit, the caregiver/wife of a patient with dementia stated, “I’m going to kill him,” and “…there’s no place to run.”
* **Probe**: The provider then spent time discussing the home situation with the patient and his wife, including thoroughly screening for elder abuse and assessing level of risk.
* **Contextual Factor:** During the discussion, the patient’s wife explained that she was having difficulty taking care of the patient on her own and needed a break once in awhile. (Domain: Social Support)
* **Contextual Plan of Care:** The provider discussed a number of options provided by the VA, obtained a social work consult, and provided contact info for adult daycare services as well as mentioning that social work would assess for a temporary nursing home respite stay.
* **Red Flag:** The patient who had a positive fecal occult test did not get a colonoscopy as had been discussed.
* **Probe**: The provider asked the patient why they hadn’t gone for the colonoscopy.
* **Contextual Factor:** The patient responded that he did not have anyone to drive him home after the procedure and therefore couldn’t schedule it. (Domain: Social Support)
* **Contextual Plan of Care:** The provider, after confirming the patient really didn’t have anyone who could drive, addressed the patient’s situation by referring him to the social worker to see if transportation could be arranged and, discussed that -- if needed -- he could stay overnight.
* **Red Flag:** A patient recently diagnosed with brain cancer mentioned that they had not had a shower in over two weeks.
* **Probe**: The provider asked why, and inquired about the patient’s home situation, indicating they knew the patient also had an ill spouse.
* **Contextual Factor:** The patient confirmed that their spouse was unable to assist with daily functions like showering. The patient said they were afraid to shower without someone nearby in case they lost their balance. (Domain: Social Support)
* **Contextual Plan of Care:** The provider arranged for the patient to be enrolled in home health care for evaluation and services so that someone could come to the house to assist the patient.
* **Red Flag:** A patient with elevate blood pressure mentioned that he was not checking his readings at home as he knew he was supposed to.
* **Probe**: The provider asked what the problem was.
* **Contextual Factor:** The patient responded that he had recently moved to an assisted living facility and his normal routine of checking and recording his BP had been disrupted. He also stated that he was having memory issues. (Domains: Social Support, and Skills, Abilities, and Knowledge)
* **Contextual Plan of Care:** The provider, patient, and patient’s daughter discussed strategies. The provider wrote a note to the facility requesting they assist patient with BP checks. The daughter agreed to be the liaison with the staff, and to help her father remember by resuming his old routine of writing the readings on a calendar.